UAS MISSION SCHEDULE/BRIEF

For use of this form, see AR 95-23. The proponent agency is DCS, G-3.

DATE *(YYYYMMDD)*	UA#	LRS MC	LRS AO	LRS PO	EO PRI/SEC	CREW CHIEF	MSN MC	MSN AO	MSN PO	FLT COND	MSN	ETD/ ETE	RAV	INITIALS		MS
														MC	BRIEFER	

LEGEND

FLIGHT CONDITION	**MS** MISSION STATUS	
D - DAY N - NIGHT I - IMC	CX - CANCELLED MC - MISSION COMPLETE NC - NOT COMPLETED AS BRIEFED; SEE REMARKS	*ENTER ADDITIONAL REMARKS ON PAGE 2 OF FORM.*

UAS MISSION SCHEDULE/BRIEF *(cont.)*

DATE *(YYYYMMDD)*	UA#	REMARKS